



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

Bib Data Sheet

CONFIRMATION NO. 3513

| | | | | |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER 10/051,601 | FILING DATE 01/17/2002 RULE | CLASS 370 | GROUP ART UNIT 2665 | ATTORNEY DOCKET NO. TI-27725.1 |
|-----------------------------|---------------------------------------|--------------|------------------------|--------------------------------------|

APPLICANTS

John M. Cioffi, Cupertino, CA;
 John Bingham, Palo Alto, CA;
 Krista S. Jacobsen, Mountain View, CA;

** CONTINUING DATA ***** *(144)*
 This application is a DIV of 08/913,210 10/22/1997 PAT 6,473,438

** FOREIGN APPLICATIONS ***** *None* *(144)*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 03/29/2002

| | | | | | |
|--|--|---------------------------|-------------------------|-----------------------|----------------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>(Signature)</i> Examiner's Signature Initials | STATE OR COUNTRY CA | SHEETS DRAWING 12 | TOTAL CLAIMS 22 | INDEPENDENT CLAIMS 5 |
|--|--|---------------------------|-------------------------|-----------------------|----------------------------|

ADDRESS
 23494
 TEXAS INSTRUMENTS INCORPORATED
 P O BOX 655474, M/S 3999
 DALLAS , TX
 75265

TITLE
 Method and apparatus for coordinating multi-point to point communications in a multi-tone data transmission system

| | | |
|------------------------------------|---|---|
| FILING FEE RECEIVED 1296 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
|------------------------------------|---|---|